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3962 U.S. PTO

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PTO/SB/50 (08-00)  
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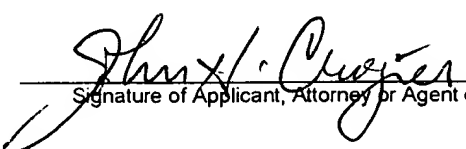
## REISSUE PATENT APPLICATION TRANSMITTAL

<b>Address to:</b>  <b>Assistant Commissioner for Patents Box Reissue Washington, DC 20231</b>		<b>Attorney Docket No.</b> 183-114	
		<b>First Named Inventor</b> S. Margolin	
		<b>Original Patent Number</b> 6,114,353	
		<b>Original Patent Issue Date (Month/Day/Year)</b> Sept. 5, 2000	
		<b>Express Mail Label No.</b> EL424883788	
<b>APPLICATION FOR REISSUE OF:</b> (Check applicable box)		<input checked="" type="checkbox"/> <b>Utility Patent</b> <input type="checkbox"/> <b>Design Patent</b> <input type="checkbox"/> <b>Plant Patent</b>	
<b>APPLICATION ELEMENTS (37 CFR 1.173)</b>		<b>ACCOMPANYING APPLICATION PARTS</b>	
<input checked="" type="checkbox"/> <b>Fee Transmittal Form (PTO/SB/56)</b> (Submit an original, and a duplicate for fee processing)		7. <input checked="" type="checkbox"/> <b>Statement of status/support for all changes to the claims. See 37 CFR 1.173 (c).</b>	
<input checked="" type="checkbox"/> <b>Applicant claims small entity status. See 37 CFR 1.27.</b>		8. <input checked="" type="checkbox"/> <b>Original U.S. Patent for surrender</b>	
<input checked="" type="checkbox"/> <b>Specification and Claims in double column copy of patent format (amended, if appropriate)</b>		<input checked="" type="checkbox"/> <b>Ribboned Original Patent Grant</b>	
<input checked="" type="checkbox"/> <b>Drawing(s) (proposed amendments, if appropriate)</b>		<input type="checkbox"/> <b>Statement of Loss (PTO/SB/55)</b>	
<input checked="" type="checkbox"/> <b>Reissue Oath/Declaration (original or copy)</b> (37 C.F.R. § 1.175) (PTO/SB/51 or 52)		9. <input type="checkbox"/> <b>Foreign Priority Claim (35 U.S.C. 119)</b> (if applicable)	
<b>Original U.S. Patent currently assigned?</b>		10. <input type="checkbox"/> <b>Information Disclosure Statement (IDS)/PTO-1449</b> <input type="checkbox"/> <b>Copies of IDS Citations</b>	
<input type="checkbox"/> <b>Yes</b> <input checked="" type="checkbox"/> <b>No</b>		11. <input type="checkbox"/> <b>English Translation of Reissue Oath/Declaration</b> (if applicable)	
(If Yes, check applicable box(es))		12. <input checked="" type="checkbox"/> <b>Preliminary Amendment</b>	
<input type="checkbox"/> <b>Written Consent of all Assignees (PTO/SB/53)</b>		13. <input checked="" type="checkbox"/> <b>Return Receipt Postcard (MPEP 503)</b> (Should be specifically itemized)	
<input type="checkbox"/> <b>37 C.F.R. § 3.73(b) Statement</b> <input type="checkbox"/> <b>Power of Attorney</b> (PTO/SB/96)		14. <b>Other:</b> .....	
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<b>NAME</b> (Print/Type) <b>John H. Crozier</b>	<b>Registration No. (Attorney/Agent)</b> <b>30,371</b>
<b>Signature</b> <i>John H. Crozier</i>	<b>Date</b> <b>Nov. 27, 2000</b>

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Reissue, Washington, DC 20231.

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REISSUE APPLICATION FEE TRANSMITTAL FORM						Docket Number (Optional) 183-114		
Claims as Filed - Part 1								
Claims in Patent		Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity		
				Rate	Fee	Rate	Fee	
(A)	Total Claims (37 CFR 1.16(j))	(B)	**** =	x \$ _____ =		or	x \$ _____ =	
(C)	Independent claims (37 CFR 1.16(i))	(D)	• =	x \$ _____ =			x \$ _____ =	
Basic Fee (37 CFR 1.16(h))					\$ 355		\$ _____	
Total Filing Fee					\$ 355	OR	\$ _____	
Claims as Amended - Part 2								
	(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
					Rate	Fee	Rate	Fee
Total Claims (37 CFR 1.16(j))	...	MINUS	..	=	x \$ _____ =		x \$ _____ =	
Independent Claims (37 CFR 1.16(i))	...	MINUS	*****	=	x \$ _____ =		x \$ _____ =	
Total Additional Fee					\$	OR	\$	
<p>If the entry in (D) is less than the entry in (C), Write "0" in column 3.</p> <p>If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.</p> <p>After any cancellation of claims.</p> <p>If "A" is greater than 20, use (B - A); if "A" is 20 or less, use (B - 20).</p> <p>***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).</p>								
<p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____. A duplicate copy of this sheet is enclosed.</p> <p><input type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. _____. A duplicate copy of this sheet is enclosed.</p> <p><input type="checkbox"/> A check in the amount of \$ _____ to cover the filing / additional fee is enclosed.</p> <p><input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p>								
<p><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p>								
<p>Nov. 27, 2000 Date</p>				<p> Signature of Applicant, Attorney or Agent of Record</p> <p>John H. Crozier Typed or printed name</p>				

PATENT  
183-114

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re US Patent Application of )  
Solomon B. Margolin )  
Reissue of US Patent No. 6,114,353 )  
Filed: Simultaneously herewith. )  
Title: COMPOSITIONS AND METHOD FOR )  
TREATMENT OF LYMPHOMAS, )  
LEUKEMIAS, AND LEIOMYOMAS ) Date: November 27, 2000

Assistant Commissioner for Patents  
Washington DC 20231

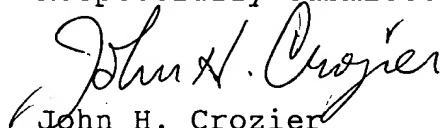
"EXPRESS MAIL" MAILING LABEL NO. EL424883788  
DATE OF DEPOSIT: NOVEMBER 27, 2000

Dear Sir:

I hereby certify that the above-identified reissue application is being deposited by me, postage prepaid, with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date set forth above, addressed to BOX REISSUE, Assistant Commissioner for Patents, Washington DC 20231.

Date: November 27, 2000.

Respectfully submitted,

  
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